ISSUE SLIP STAPLE AREA (for additional cross references)

DATE	ID NO.	INITIALS	POSITION
<u> </u>			
- 10	70385	MA	FEE DETERMINATION
7/8	59	· · · · · · · · · · · · · · · · · · ·	O.I.P.E. CLASSIFIER
28/18/00	SC 825	M	FORMALITY REVIEW
2-14-00	JC 850	FH	RESPONSE FORMALITY REVIEW
2-14	JC 850	FH	RESPONSE FORMALITY REVIEW

INDEX OF CLAIMS

/	Reiected	N	Non-elected
=		1	Interference
— (Through num		Α	Appeal
÷ (,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,	•	0	Objected

÷ Hestricted U Objected						
Claim	Claim Date	Claim Date				
Final driginal driginal	Final Original	Original				
	51	101				
	52	102				
	53	103				
190	54	104				
25077	55	105				
	56	106				
	57	107				
8 / 1/2	58 59	109				
	60	110				
	61	111				
	62	112				
	63	113				
100	64	114				
	65	115				
	66	117				
	68	118				
18	69	119				
20	70	120				
	71	121				
22 1	72	122				
23	73	123				
23 24	74	124				
25	75	125				
26	76	127				
27 28	78	128				
29	79	129				
30	80	130				
31	81	131				
32	82	132				
. 33	83	133				
34	84 85	135				
35 36	86	136				
37	87	137				
38	88	138				
39	89	139				
40	90	140				
41	91	141				
42	92	142				
45	93	144				
44	94	145				
45	96	146				
. 46	97	147				
48	98	148				
49	99	149				
50	100	150				

If more than 150 claims or 10 actions staple additional sheet here